F	00	d	E	S	tablishment Inspection	R	e.	po	or	t						S	core:	<u>91</u>	.5	
Es	tak	olis	hn	nei	nt Name: NOBLE S GRILLE									E	Sta	ablishment ID: 3034010614				
					ress: 380 KNOLLWOOD ST											X Inspection ☐ Re-Inspection				
Ci	City: WINSTON SALEM State: NC									Date: 07 / 23 / 2014 Status Code: A										
	Zip: 27103 County: 34 Forsyth									Time In: $01:00$ $0$ $0$ am $0$ Time Out: $04:45$ $0$ am $0$ pm										
	Permittee: NOBLES GRILLS OF WINSTON SALEM, INC.									Total Time: 3 hrs 45 minutes										
				-									C	ate	go	ry #: N		_		
	_				(336) 777-8477		_	0::	_	_			FI	DΑ	Es	stablishment Type:				
					System: ⊠Municipal/Community [					•	ter	n				Risk Factor/Intervention Violations:	7			
W	ate	r S	up	pl	y: ⊠Municipal/Community □On-	Site	e S	Sup	ply	/						Repeat Risk Factor/Intervention Vic		1	1	
	-00	dha	rne	ااا د	lness Risk Factors and Public Health Int	erv/	en.	tion	٥							Good Retail Practices				
F	Risk	acto	rs: C	Contr	ributing factors that increase the chance of developing foodb	orne	illn		0			Good	d Re	tail I	Pract	tices: Preventative measures to control the addition of pa	thogens, ch	emic	als,	
-					rventions: Control measures to prevent foodborne illness or	·	_	1		T		Ī				and physical objects into foods.	T	T	.1 _	T
(	upe	OUT rvisi		N/O	Compliance Status .2652	0	UT	CD	I R	VR	9	afe F			N/O		OUT	CD	I R	VR
1	X				PIC Present; Demonstration-Certification by	2			Т			×			u vv	Pasteurized eggs used where required	1 0.5	JL.	1	
E	mpl	oye	e He	alth	accredited program and perform duties .2652							$\boxtimes$				Water and ice from approved source	2 1		1	
2	X				Management, employees knowledge; responsibilities & reporting	3 [1	1.5	0			30		$\mathbf{X}$	П		Variance obtained for specialized processing	+++		+	
3	X				Proper use of reporting, restriction & exclusion	3 1	.5 (								atur	methods re Control .2653, .2654		3 -	1	
(	9000	Ну	gien	ic P	ractices .2652, .2653		Ţ					X		ipo.		Proper cooling methods used; adequate equipment for temperature control	1 0.5		ī	ıП
4	X				Proper eating, tasting, drinking, or tobacco use	2	1 (				_	$\mathbf{X}$		П		Plant food properly cooked for hot holding	1 0.5		1	
5	X				No discharge from eyes, nose or mouth	10	).5	0			_	X				Approved thawing methods used	1 0.5		1	$\perp$
		ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656		Ţ	_			_	-		Ш					1 -	
6	X				Hands clean & properly washed	4	2					ood	Idor	tifi <i>c</i>	natio	Thermometers provided & accurate on .2653	1 0.5		1	
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1	1.5				35		X	ш	Janu	Food properly labeled: original container	2 1			П
8		X			Handwashing sinks supplied & accessible	2	1	K X				$\Box$		n of	Foo	od Contamination .2652, .2653, .2654, .2656, .20				
	ppr	ovec	l So	urce						1_	36	X				Insects & rodents not present; no unauthorized animals	2 1	0 [		
⊢	×				Food obtained from approved source	2	1 (			Ш	37	X				Contamination prevented during food preparation, storage & display	2 1		ilc	
10				×	Food received at proper temperature	2	1 (			Ш		X	П			Personal cleanliness			+	$\frac{1}{1}$
11	X				Food in good condition, safe & unadulterated	2					-		$\mathbf{X}$			Wiping cloths: properly used & stored		+	+	
12			X		Required records available: shellstock tags, parasite destruction	2	1					×				Washing fruits & vegetables	1 0.5			
_			_		Contamination .2653, .2654							$\perp$	r Us	se o	f Ute	ensils .2653, .2654			1	'IL
-			Ш	Ш		$\vdash$	+		-	$\vdash$			X			In-use utensils: properly stored	1 0.5	<b>X</b> X		
⊢		X			Food-contact surfaces: cleaned & sanitized  Proper disposition of returned, previously served,		×			X	42		×			Utensils, equipment & linens: properly stored, dried & handled	1 🔀	) <b> </b>		
_	X				reconditioned, & unsafe food	2	1 (			Ш		<b>X</b>	_			Single-use & single-service articles: properly			+	
	oter X	ntial	y Ha	azar	Proper cooking time & temperatures	3 1	.5 (		Г	П						stored & used Gloves used properly			1 -	
$\vdash$		_				Н							ile a	and	Fau	ipment .2653, .2654, .2663	[][0.5][	4	<u> </u>	
-	×				Proper reheating procedures for hot holding		.5 (	#=						IIIu	Lqu	Equipment, food & non-food contact surfaces		T	T	
$\vdash$	X	Ш		Ш	Proper cooling time & temperatures		.5 (			Ш	45		X			approved, cleanable, properly designed, constructed, & used	2 🗶	<u>"</u>	1	
19	X				Proper hot holding temperatures	П	.5 (	1-			46		X			Warewashing facilities: installed, maintained, & used; test strips	1 0.5	<b>K</b>		
20		X			Proper cold holding temperatures	3	×			X	47	X				Non-food contact surfaces clean	1 0.5	] [		
21		X			Proper date marking & disposition	3 1	.5					hysi			litie					
22			X		Time as a public health control: procedures & records	2	1 (				_	X				Hot & cold water available; adequate pressure	2 1			
(	cons		r Ac	lvis							49	X				Plumbing installed; proper backflow devices	2 1			
23		X			Consumer advisory provided for raw or undercooked foods	×	).5 (		×		50	X				Sewage & waste water properly disposed	2 1	1		
		y Sι □	isce	ptib	ple Populations .2653 Pasteurized foods used; prohibited foods not	7 1-	5 7				51	X				Toilet facilities: properly constructed, supplied & cleaned	1 0.5			
24	hen	LIC2			offered .2653, .2657		) اك.	لــاك			52	×				Garbage & refuse properly disposed; facilities maintained	1 0.5			
	X				Food additives: approved & properly used	10	).5 (				53	×				Physical facilities installed, maintained & clean	1 0.5			
⊢	×	_			Toxic substances properly identified stored, & used	2	1 1		<del> -</del>		54		_			Meets ventilation & lighting requirements;	1 0.5	_		
		_	_		, ,, , , , , , , , , , , , , , , , , , ,		71		1		Ľ		_			designated areas used			1	



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Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



**Total Deductions:** 

# Addendum to Food Establishment In

Comment Addendam to Food Establishment inspection Report													
Establishmer	nt Name: NOBLES GRI	LLE			Establishment ID: 3034010614								
City: WINST County: 34 Wastewater S Water Supply	Forsyth  System:  Municipal/Commu	nity 🗌 C	Zip: 27103 On-Site System On-Site System	te: NC	Inspect Comment A  Email 1: Email 2:		Re-Inspection Attached?	Status Code: A Category #:					
Telephone:	(336) 777-8477				Email 3:								
Temperature Observations													
Item Cut Tomatoes	Location Make Unit	Temp 55	Item Sanitizer	Location Bar Dish M	achine	Temp 0	Item Mushroom	Location Cooling Bin	Temp 45				
House Ranch	Make Unit	57	Sanitizer	Bucket		0	Marinara	Cooling Bin	86				
Raw Shrimp	Make Unit	45	Raw Salmon	WIC		39	Raw Oysters	Make Unit	44				
Raw Chicken	Make Unit	43	Raw Chicken	WIC		38							
House	Make Unit	45	Cut Melon	WIC		42							
Cut Tomatoes	Make Unit	42	Sweet	Hot Holding	Drawer	165							
Hot Water	Prep Sink	145	Lettuce	WIC		44							
Sanitizer	3-comp	200	Quinoa	WIC		45							

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

6-301.12 Hand Drying Provision - PF. General Comment-One hand sink of five did not have paper towels. All handwashing sinks must have individual paper towels supplied to them. CDI-Operator replaced paper towels.

- 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation P. Raw meats were commingled in freezer 13 that were packaged using ROP and frozen at facility. Raw salmon was stored next to fresh vegetables in cold holding drawers. Raw chicken was stored above cut onions in cold holding drawers. Raw foods must be stored underneath ready-to-eat foods & raw meats must be stored based on final cook temperatures. Only commercially frozen raw meats can be commingled in a freezer. CDI-All raw foods moved to appropriate locations.
- 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P. Repeat Violation. Dish machine at bar is not sanitizing dishes properly. Sanitizer concentration was 0 ppm. Chlorine sanitization requires a concentration of 50-200 ppm. Dish machine in bar area must be repaired within 10 days. Until machine is repaired, wash bar glasses in dishwasher in kitchen. When dish machine is repaired call Jo Farmer at 703-3136 for a verification visit./Sanitizer in the bucket below the sandwich line read 0 ppm. Sanitizer in sanitizer buckets must be maintained between 200-400 ppm. CDI-Switched out sanitizer for sanitizer of proper strength./4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P. Approximately 25% of plates & utensils were stacked with food residue on them. Food-contact surfaces must be cleaned to sight & touch. CDI-Sent all plates & utensils back for rewashing.

First Last

John Bobby Person in Charge (Print & Sign):

Last

Regulatory Authority (Print & Sign): Jo Farmer, REHSI

Christy Allred, REHS

REHS ID: 1958 - Allred, Christy

First

REHS Contact Phone Number: ( 336) 703 - 3136





erification Required Date: Ø8/Ø2/2014

Establishment Name: NOBLE S GRILLE Establishment ID: 3034010614

#### **Observations and Corrective Actions**



- 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding P. Cut tomatoes, house ranch dressing, & cut leafy greens in one make unit on sandwich line we 55-57 F. Operator stated that make unit was broken this morning and that they called to get it repaired. Potentially hazardous food must be held cold below 45 F. Discontinue use of make unit until repaired. Call Jo Farmer at 703-3136 when make unit is repaired for a verification visit. The make unit must be repaired within 10 days. CDI-all food in make unit was voluntarily discarded.
- 3-501.17 Ready-To-Eat Potentially Hazardous Food (PHF) (Time/Temperature Control for Safety Food), Date Marking PF. General Comment-Three pans of cooked vegetables out of approximately 15 pans of potentially hazardous food (PHF) from the previous day were not date marked. All PHF must be date marked with prep or discard date. CDI-Operator date marked pans.
- 3-603.11 Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens PF. Repeat Violation. Menu has consumer advisory disclosure but reminder asterisks do not lead patrons to the consumer advisory disclosure. The asterisks instead lead patrons to read that entree comes with fries or a salad. When any products are served raw or contain raw ingredients they must have a reminder, such as an asterisk, and a consumer advisory disclosure. Ensure that menus are properly asterisked.
- 8-103.12 Conformance with Approved Procedures P,PF. Reduced oxygen packaging (ROP) is being used on cut melon, raw meats & fish, cheese, cooked vegetables, & desserts. The HACCP plan provided is only approved for meats & cheeses, not cut melon, cooked vegetables, or desserts. The logs inside the plan are not being implemented or followed. Use logs & implement HACCP plan./Curing salt that contains nitrites is being used to extend quality of raw meats & maintain color. This process requires a HACCP plan and possibly a variance that needs to be approved by the state. Due to the risky nature of using curing salt, discontinue use until an approval from the state has been obtained. The HACCP plan must be followed for ROP of meats & cheeses within ten days. When HACCP plan is in place call Jo Farmer at 703-3136 for a verification visit. Discontinue use of curing salt until a HACCP plan/variance has been obtained from the state.
- 8-103.11 Documentation of Proposed Variance and Justification PF. General Comment-The HACCP plan provided is for a sister restaurant in Charlotte, NC. A HACCP plan needs to be provided for Noble's Grill. An approval letter for the HACCP plan from the state needs to be provided as well. In addition to acquiring a HACCP plan for Noble's grill, items that are not on the plan for sister restaurant need to be added. Cut melon, cooked vegetables, & desserts that are being packaged using reduced oxygen packaging need to be on the HACCP plan for Noble's Grill./A HACCP plan & possibly a variance needs to be obtained for using curing salt that contains nitrites before use of nitrites continues in this facility. Until an approval letter from the state for Noble's Grill & a HACCP plan/variance for Noble's Grill can be provided and is implemented do not use curing salt.
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food C. General Comment-Repeat Violation-Appoximately 10% of containers of salt, graham cracker crust, & sauce bottles are not labeled. When food is removed from its original container it must be labeled with the common name of the food. CDI-Operator labeled all items.
  - 3-304.14 Wiping Cloths, Use Limitation C. At least 5 wet wiping cloths were observed throughout kitchen lying on food-prep surfaces. Only one sanitizer bucket, that contained sanitizer that measured at 0 ppm, was available in the entire kitchen and it was only made available when inspector walked in the door. A stack of empty sanitizer buckets was observed next to dish machine. When not in use wet wiping cloths must be stored, completely submerged, in sanitizer buckets. Use sanitizer buckets to store wet wiping cloths & ensure that sanitizer is maintained at a concentration between 200-400 ppm.





Establishment Name: NOBLE S GRILLE Establishment ID: 3034010614

#### **Observations and Corrective Actions**



- 3-304.12 In-Use Utensils, Between-Use Storage C. General Comment-Two handles in raw oysters at make unit were submerged in the product. When storing scoops inside food product, ensure that the handle is submerged to prevent contamination. CDI-Moved handles so they were no longer submerged in product.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required C. At least 50% of pans & utensils were stacked wet. After washing, rinsing, & sanitizing dishes & utensils they must be air-dried. CDI-Pans stacked to facilitate air-drying.
- 4-205.10 Food Equipment, Certification and Classification C. Two containers of food were stored with cups being used as scoops. Since cups do not have handles, they cannot be used as scoops. CDI-Cups removed from products./4-501.11 Good Repair and Proper Adjustment-Equipment C. Two cutting boards were severely broken. One make unit is not functioning properly & cannot keep food at proper temperature. Cutting boards were voluntarily discarded & make unit needs to be repaired within 10 days. Call Jo Farmer at 703-3136 when repairs have been completed.
- 4-302.14 Sanitizing Solutions, Testing Devices PF. General Comment. Test strips were provided for dish machines but quat test strips for 3-comp sink were faded due to water damage. Test strips that can accurately measure sanitizer concentration must be provided. Replace & use test strips. CDI-Super Source representative brought test strips.





Establishment Name: NOBLE S GRILLE Establishment ID: 3034010614

### **Observations and Corrective Actions**





Establishment Name: NOBLE S GRILLE Establishment ID: 3034010614

### **Observations and Corrective Actions**



